

Case 1:08-cv-01745 Document 3 Filed 03/26/2008 Page 1 of 1
U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

David Melamed, M.D., Plaintiff,

v.

John T. Girardi, M.D. and Medical Specialists, Ltd., an IL Corporation, Defendant.

Case Number:

FILED: MARCH 26, 2008

08CV1745 PH

JUDGE HIBBLER

MAGISTRATE JUDGE KEYS

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

Plaintiff, DAVID MELAMED, M.D.

NAME (Type or print) S/JOEL A. D'ALBA	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) S/JOEL A. D'ALBA	
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ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 00571121	TELEPHONE NUMBER (312) 263-1500
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	